| E:II : | this information to identify your case: | | |
|----------------|---|-------------|-------------------------------|
| | | | |
| Debt | r 1 Houston Lamar Hutto First Name Middle Name Last Name | | |
| Debt (Spous | r 2 if, filing) First Name Middle Name Last Name | | |
| | I States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI | | |
| | | | |
| (if know | number | _ | k if this is an ded filing |
| | | | |
| Offi | cial Form 106Sum | | |
| Sun | mary of Your Assets and Liabilities and Certain Statistical Information | | 12/15 |
| inforr | complete and accurate as possible. If two married people are filing together, both are equally responsible fo ation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend riginal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. | | |
| Part | Summarize Your Assets | | |
| | | Your a | ssets of what you own |
| 1. | a. Copy line 55, Total real estate, from Schedule A/B | \$ | 200,000.00 |
| | b. Copy line 62, Total personal property, from Schedule A/B | · — | |
| | | \$ | 44,860.56 |
| | c. Copy line 63, Total of all property on Schedule A/B | \$ | 244,860.56 |
| Part : | Summarize Your Liabilities | | |
| | | | abilities t you owe |
| | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) la. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 113,788.00 |
| | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) ia. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 49,236.00 |
| | Your total liabilities | \$ | 163,024.00 |
| Part | Summarize Your Income and Expenses | | |
| | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 4,587.91 |
| | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,842.19 |
| Part - | Answer These Questions for Administrative and Statistical Records | | |
| | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo | ur other sc | hedules. |
| 7. | ■ Yes Vhat kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a personal | , family, or |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules. | s box and s | ubmit this form to |

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Debtor 1 Houston Lamar Hutto Case number (if known)

3. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$_____5,958.33

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|---|--------------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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| e: SOUTHER DPERTY cribe items. List acurate as possibl ach a separate si | le. If two married po heet to this form. C ther Real Estate Yo | Last Name Last Name MISSISSIPPI Define the second of t | both are equally r nal pages, write yo | esponsible for su | pplying correct |
|---|--|--|--|--|---|
| DPERTY cribe items. List acurate as possible ach a separate stems. ding, Land, or Other them. | an asset only once le. If two married po heet to this form. O | MISSISSIPPI 2. If an asset fits in more eople are filing together, on the top of any addition to the | both are equally r nal pages, write yo | esponsible for su | amended filing 12/15 the category where you applying correct |
| DPERTY cribe items. List acurate as possible ach a separate stems. ding, Land, or Other them. | an asset only once le. If two married po heet to this form. O | MISSISSIPPI 2. If an asset fits in more eople are filing together, on the top of any addition to the | both are equally r nal pages, write yo | esponsible for su | amended filing 12/15 the category where you applying correct |
| OPERTY cribe items. List acurate as possible ach a separate stems. | an asset only once le. If two married po heet to this form. C ther Real Estate Yo | s. If an asset fits in more eople are filing together, On the top of any addition u Own or Have an Interes | both are equally r nal pages, write yo | esponsible for su | amended filing 12/15 the category where you applying correct |
| cribe items. List a curate as possibl ach a separate sl ding, Land, or Ot | le. If two married po heet to this form. C ther Real Estate Yo | eople are filing together, On the top of any addition u Own or Have an Interes | both are equally r nal pages, write yo | esponsible for su | amended filing 12/15 the category where you applying correct |
| cribe items. List a curate as possibl ach a separate sl ding, Land, or Ot | le. If two married po heet to this form. C ther Real Estate Yo | eople are filing together, On the top of any addition u Own or Have an Interes | both are equally r nal pages, write yo | esponsible for su | the category where you applying correct |
| cribe items. List a curate as possibl ach a separate sl ding, Land, or Ot | le. If two married po heet to this form. C ther Real Estate Yo | eople are filing together, On the top of any addition u Own or Have an Interes | both are equally r nal pages, write yo | esponsible for su | the category where you applying correct |
| curate as possibl ach a separate sh ding, Land, or Ot | le. If two married po heet to this form. C ther Real Estate Yo | eople are filing together, On the top of any addition u Own or Have an Interes | both are equally r nal pages, write yo | esponsible for su | pplying correct |
| table interest in a | any residence, build | ding, land, or similar prop | | | |
| | | | | | |
| otion | Single-fai | mily home r multi-unit building | the am | ount of any secure | d claims on Schedule D: |
| 39439-0000 | _ | ured or mobile home | entire _l | property? | Current value of the portion you own? |
| ZIP Code | _ | | Descrii (such a | oe the nature of y | \$200,000.00 our ownership interest ancy by the entireties, or |
| | Debtor 1 | only | eck one a life e | state), if known. | |
| | Debtor 1 At least o | and Debtor 2 only one of the debtors and anot on you wish to add abou | ther Ge | e instructions) | nmunity property |
| | 39439-0000 ZIP Code | Single-far Duplex or Condomic | Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Ch Debtor 1 only Debtor 2 only At least one of the debtors and ano | Single-family home Do not the amore Creditor Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Current entire property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as the amore corrections of the debtors and another Do not the amore cooperative Current entire property Check one Chec | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local Do not deduct secured clather the amount of any secure Creditors Who Have Clain Current value of the entire property? \$200,000.00 Current value of the entire property? \$200,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known. |

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

| Deb | tor 1 H | ouston Lar | nar Hutto | | Case number (if known) | |
|--------------|-----------------|-------------------------------|---|--|---------------------------------------|---|
| 3. C | ars, vans, | trucks, tract | ors, sport utility ve | hicles, motorcycles | | |
| | No | | | | | |
| | Yes | | | | | |
| 3.1 | | Chevrole Camaro | <u>t</u> | Who has an interest in the property? Check one | the amount of any s | red claims or exemptions. Put secured claims on Schedule D: |
| | Model: Year: | 2019 | | ■ Debtor 1 only □ Debtor 2 only | | e Claims Secured by Property. |
| | | nate mileage: | 81670 | Debtor 1 and Debtor 2 only | Current value of the entire property? | ne Current value of the portion you own? |
| | Other inf | ormation: | | ☐ At least one of the debtors and another | | |
| | | | | ☐ Check if this is community property (see instructions) | \$19,080. | \$19,080.00 |
| 5 A | | | | n for all of your entries from Part 2, including | | \$19,080.00 |
| .p | ages you | nave attache | ed for Part 2. Write | that number here | => | <u> </u> |
| Part | 3: Descril | oe Your Perso | nal and Household Ite | ems | | |
| Do y | you own o | r have any le | egal or equitable in | terest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| E | | | urnishings ces, furniture, linens | , china, kitchenware | | |
| | | | Household Goo | ds | | \$3,500.00 |
| | | including cell | | eo, stereo, and digital equipment; computers, pr nedia players, games | rinters, scanners; music co | llections; electronic devices |
| | | | Electronics | | | \$500.00 |
| E | , | Antiques and other collection | figurines; paintings, ons, memorabilia, co | prints, or other artwork; books, pictures, or othe llectibles | er art objects; stamp, coin, | or baseball card collections; |
| E | xamples: | musical instru | graphic, exercise, ar | nd other hobby equipment; bicycles, pool tables, | , golf clubs, skis; canoes a | nd kayaks; carpentry tools; |
| 10. F | Firearms | | s, shotguns, ammuni | tion, and related equipment | | |

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| Deb | tor 1 | Houston Lam | ar Hut | to | C | ase number (if known) | |
|--------------|----------------------------|----------------------|-----------|-----------------------|--|--------------------------|---|
| | Yes. | Describe | | | | | |
| | Clothes | | | | | | |
| | <i>Examp</i>] No | oles: Everyday clot | hes, fur | s, leather coats, des | signer wear, shoes, accessories | | |
| | Yes. | Describe | | | | | |
| | | [| Clothi | na | | | \$2,000.00 |
| | | L | | | | | |
| | Jewelry | | | | | | |
| _ | <i>Examp</i> ■ No | oles: Everyday jew | elry, cos | stume jewelry, enga | gement rings, wedding rings, heirloom jew | velry, watches, gems, g | old, silver |
| | | Describe | | | | | |
| 13. I | Non-fai | rm animals | | | | | |
| | Examp | oles: Dogs, cats, b | rds, hor | ses | | | |
| _ |] No I Yes | Describe | | | | | |
| | - 100. | DOGGNIDO | | | | | |
| | | | Pet | | | | \$10.00 |
| | | | | | | | |
| | Any oti I _{No} | ner personai and | nouse | noia items you dia | not already list, including any health ai | as you ald not list | |
| | | Give specific info | rmation. | | | | |
| | | | | | | | |
| 15. | | | | | Part 3, including any entries for pages y | ou have attached | \$6,010.00 |
| | 101 F | art 3. Write that in | umber | iere | | | |
| Part | 4: Des | scribe Your Financi | al Asset | s | | | |
| | | | | | any of the following? | | Current value of the |
| | | | | | | | <pre>portion you own? Do not deduct secured</pre> |
| | | | | | | | claims or exemptions. |
| | Cash Evamo | oles: Money you b | ave in v | our wallet in your b | ome, in a safe deposit box, and on hand w | hen vou file vour petiti | on. |
| _ | I No | nes. Money you ne | ave iii y | our wanet, in your in | ome, in a said deposit box, and on hand w | nen you me your penn | 511 |
| | Yes | | | | | | |
| | | | | | | Cash | \$4,005.00 |
| | | | | | | | |
| | | ts of money | .: | | over a substitution of demonstrate above in our | ditiana bualtanana l | |
| | Examp | | | | ounts; certificates of deposit; shares in cre s with the same institution, list each. | dit unions, brokerage i | louses, and other similar |
| |] No ■ | | | | Institution name: | | |
| | ■ Yes | | | | mondation name. | | |
| | | | 17.1. | Checking | Sunbelt FCU | | \$16.00 |
| | | | | | | | |
| | | | 17.2. | Savings | Sunbelt FCU | | \$5.00 |
| | | | | | | | - |
| | | | 17 2 | Checking | Magnolia State Bank | | \$744.56 |

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| De | ebtor 1 | Houston Lamar Hutto | Case number (if known) | |
|-----|--------------------|--|--|--|
| 18. | | mutual funds, or publicly traded stocks bles: Bond funds, investment accounts with b | brokerage firms, money market accounts | |
| | ■ No | | | |
| | ☐ Yes | Institution or issue | er name: | |
| 19. | Non-pu joint ve | • | rporated and unincorporated businesses, including an interest in a | n LLC, partnership, and |
| | ■ No | | | |
| | ☐ Yes. | Give specific information about them Name of entity: | | |
| 20. | Negotia Non-ne | able instruments include personal checks, c | gotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them. | |
| | ■ No | | | |
| | ⊔ Yes. (| Give specific information about them Issuer name: | | |
| 21. | Examp | nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k). | , 403(b), thrift savings accounts, or other pension or profit-sharing plans | |
| | ■ No | | | |
| | ☐ Yes. I | List each account separately. Type of account: | Institution name: | |
| 22. | Your sh | | so that you may continue service or use from a company of, public utilities (electric, gas, water), telecommunications companies, o | r others |
| | ■ No | | | |
| | ☐ Yes | | Institution name or individual: | |
| 23. | Annuiti No | ies (A contract for a periodic payment of mo | oney to you, either for life or for a number of years) | |
| | ☐ Yes | Issuer name and description. | | |
| 24. | Interest | s in an education IRA, in an account in a C. §§ 530(b)(1), 529A(b), and 529(b)(1). | qualified ABLE program, or under a qualified state tuition program | |
| | ■ No □ Yes | Institution name and descripti | ion. Separately file the records of any interests.11 U.S.C. § 521(c): | |
| 25. | | equitable or future interests in property | (other than anything listed in line 1), and rights or powers exercisa | ble for your benefit |
| | ■ No □ Yes. | Give specific information about them | | |
| 26. | | s, copyrights, trademarks, trade secrets, oles: Internet domain names, websites, proce | and other intellectual property eeds from royalties and licensing agreements | |
| | ■ No | | | |
| | ☐ Yes. | Give specific information about them | | |
| 27. | | es, franchises, and other general intangil oles: Building permits, exclusive licenses, co | bles operative association holdings, liquor licenses, professional licenses | |
| | | Give specific information about them | | |
| M | oney or p | property owed to you? | | Current value of the portion you own? Do not deduct secured |

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

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| De | ebtor 1 | Houston Lamar Hutto | | | Case number (if known) | |
|-------------|------------------------|---|--|-----------------------|-------------------------------|----------------------------|
| 28. | Tax ref | funds owed to you | | | | |
| | | Give specific information about t | hem, including whether you already | filed the returns an | d the tax years | |
| | | | | |] | |
| | | | Federal Tax Refund | | | \$5,000.00 |
| | | | | |] | |
| | | | State Tax Refund | | | \$5,000.00 |
| | | | | | 7 | |
| | | | EIC | | | \$5,000.00 |
| 29. | | support | | | | |
| | Exam _l ■ No | ples: Past due or lump sum alimo | ny, spousal support, child support, | maintenance, divor | ce settlement, property se | ttlement |
| | _ | Give specific information | | | | |
| 30. | | amounts someone owes you | | | | |
| | Exam | ples: Unpaid wages, disability ins benefits; unpaid loans you | urance payments, disability benefits nade to someone else | s, sick pay, vacation | pay, workers' compensa | ation, Social Security |
| | ■ No | | | | | |
| | ☐ Yes. | Give specific information | | | | |
| 31. | _Exam | sts in insurance policies ples: Health, disability, or life insu | rance; health savings account (HS | A); credit, homeown | er's, or renter's insurance | |
| | □ No ■ Yes | Name the insurance company of | each policy and list its value | | | |
| | _ 100. | Company | | Beneficiar | y: | Surrender or refund value: |
| | | Life Insu | rance - no cash value | | | \$0.00 |
| | | l ifa Insu | rance - no cash value | | | \$0.00 |
| | | Life inst | rance - no cash value | | | |
| 32. | If you somed | | ou from someone who has died it, expect proceeds from a life insur | ance policy, or are o | currently entitled to receive | e property because |
| | ■ No □ Yes. | Give specific information | | | | |
| 22 | | · | or not you have filed a lawquit o | r mada a damand f | ior noumant | |
| <i>ა</i> ა. | | | or not you have filed a lawsuit o outes, insurance claims, or rights to | | or payment | |
| | | Describe each claim | | | | |
| 34. | _ | contingent and unliquidated cl | aims of every nature, including c | ounterclaims of th | e debtor and rights to se | et off claims |
| | ■ No □ Yes. | Describe each claim | | | | |
| 35. | Any fir | nancial assets you did not alrea | ady list | | | |
| | ■ No | Give specific information | | | | |
| | – 165. | One openio inionnation | | | | |

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| Deb | tor 1 | Houston Lamar Hutto | | Case number (if known) | |
|--------------|---------------|--|----------------------------|------------------------------|--------------|
| 36. | | he dollar value of all of your entries from Part 4, includin rt 4. Write that number here | | | \$19,770.56 |
| Part | 5: Des | scribe Any Business-Related Property You Own or Have an Intere | est In. List any real esta | ate in Part 1. | |
| 37. C | o you o | wn or have any legal or equitable interest in any business-relate | ed property? | | |
| | No. Go | to Part 6. | | | |
| | Yes. G | o to line 38. | | | |
| Part | | scribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1. | Own or Have an Intere | st In. | |
| 46. l | Do you | own or have any legal or equitable interest in any farm- | or commercial fishir | ng-related property? | |
| | ■ No. | Go to Part 7. | | | |
| | ☐ Yes. | Go to line 47. | | | |
| Part | 7: | Describe All Property You Own or Have an Interest in That You | Did Not List Above | | |
| 53. I | | have other property of any kind you did not already list? | • | | |
| | Examp ■ No | les: Season tickets, country club membership | | | |
| | | Give specific information | | | |
| | | · | | | . |
| 54. | Add t | he dollar value of all of your entries from Part 7. Write tha | at number here | | \$0.00 |
| Part | 8: | List the Totals of Each Part of this Form | | | |
| 55. | Part 1 | : Total real estate, line 2 | | | \$200,000.00 |
| 56. | Part 2 | : Total vehicles, line 5 | \$19,080.00 | _ | |
| 57. | Part 3 | : Total personal and household items, line 15 | \$6,010.00 | | |
| 58. | Part 4 | : Total financial assets, line 36 | \$19,770.56 | | |
| | | : Total business-related property, line 45 | \$0.00 | | |
| 60. | | : Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7 | : Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total | personal property. Add lines 56 through 61 | \$44,860.56 | Copy personal property total | \$44,860.56 |
| 63. | Total | of all property on Schedule A/B. Add line 55 + line 62 | | | \$244,860.56 |

| Fill | I in this inform | ation to identify your o | case: | | | 1 |
|---------------------------|---|--|--|-----------------------------|--|---|
| | btor 1 | Houston Lamar H | | | | |
| | | First Name | Middle Name | L | ast Name | |
| | btor 2 ouse if, filing) | First Name | Middle Name | L | _ast Name | |
| | | kruptcy Court for the: | SOUTHERN DISTRICT OF | MISS | ISSIPPI | |
| 011 | illed States Dani | kruptcy Court for the. | OCCUPATION OF THE CONTROL OF | IVIIOO | | |
| | se number | | | | | ☐ Check if this is an amended filing |
| Of | fficial For | m 106C | | | | |
| S | chedule | C: The Pro | operty You Cla | aim | as Exempt | 4/25 |
| the nee case | property you list ded, fill out and e number (if kno | ted on <i>Schedule A/B: P</i> attach to this page as nown). | Property (Official Form 106A/B many copies of Part 2: Addition |) as yo nal Pa | our source, list the property that you age as necessary. On the top of any | additional pages, write your name and |
| spe any func exe | cific dollar ame applicable sta ds—may be un emption to a pa | ount as exempt. Alterr tutory limit. Some exe limited in dollar amou | natively, you may claim the emptions—such as those fo unt. However, if you claim a | full fa r heal n exer | ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu | One way of doing so is to state a sing exempted up to the amount of penefits, and tax-exempt retirement se under a law that limits the t, your exemption would be limited |
| Pa | rt 1: Identify | the Property You Clai | im as Exempt | | | |
| 1. | Which set of e | exemptions are you cl | aiming? Check one only, eve | en if yo | our spouse is filing with you. | |
| | You are clai | ming state and federal | nonbankruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | |
| | _ | · · | ns. 11 U.S.C. § 522(b)(2) | | 3 - (-)(-) | |
| 2 | | | 3 (),() | emnt | fill in the information below. | |
| | | n of the property and line | • | • • | ount of the exemption you claim | Specific laws that allow exemption |
| | | nat lists this property | portion you own Copy the value from | | eck only one box for each exemption. | · |
| | 88 Mag Willi | ams Rd Heidelberg, | Schedule A/B | | ¢75,000,00 | Miss. Code Ann. § 85-3-21 |
| | 39439 Jasp | er County | \$200,000.00 | _ | \$75,000.00 | 3 00 0 2 |
| | Line from Sche | edule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Household (| | \$3,500.00 | | \$3,500.00 | Miss. Code Ann. § 85-3-1(a) |
| | Line nom Sche | edule A/B. G. I | | | 100% of fair market value, up to | |
| | | | | | any applicable statutory limit | |
| | Electronics Line from Sche | edule A/B: 7.1 | \$500.00 | | \$500.00 | Miss. Code Ann. § 85-3-1(a) |
| | | | | | 100% of fair market value, up to any applicable statutory limit | |
| | Clothing | edule A/B: 11.1 | \$2,000.00 | | \$2,000.00 | Miss. Code Ann. § 85-3-1(a) |
| | Line nom Sche | ъчию <i>М</i> | | | 100% of fair market value, up to any applicable statutory limit | |
| | Pet | | \$10.00 | | \$10.00 | Miss. Code Ann. § 85-3-1(a) |

Official Form 106C

100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B: 13.1

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| De | btor 1 | Houston Lamar Hutto | | Case number (if known) | | | | |
|------|---|---|---|------------------------|---|------------------------------------|--|--|
| | | description of the property and line on dule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | | |
| | | | Copy the value from Check only one box for each exemption. Schedule A/B | | | | | |
| Cas | | h from <i>Schedule A/B</i> : 16.1 | \$4,005.00 \$ | | \$3,990.00 | Miss. Code Ann. § 85-3-1(a) | | |
| | LIIIC | Total General FAB. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | Federal Tax Refund Line from Schedule A/B: 28.1 | | \$5,000.00 | | \$5,000.00 | Miss. Code Ann. § 85-3-1(j) | | |
| LINE | | nom Schedule A/B. 20.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | State Tax Refund Line from Schedule A/B: 28.2 | | \$5,000.00 | | \$5,000.00 | Miss. Code Ann. § 85-3-1(k) | | |
| | LINE | nom Schedule PVB. 20.2 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | EIC | from Schedule A/B: 28.3 | \$5,000.00 | | \$5,000.00 | Miss. Code Ann. § 85-3-1(i) | | |
| | LINE | nom Schedule FVB. 20.3 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| 3. | (Sub | ou claiming a homestead exemption ect to adjustment on 4/01/28 and every | | | led on or after the date of adjustmer | t.) | | |
| | | NO | | | | | | |
| | | Yes. Did you acquire the property cove | red by the exemption wi | thin 1 | ,215 days before you filed this case | | | |
| | | □ No | | | | | | |
| | | ☐ Yes | | | | | | |

| Fill in this inform | nation to identify you | ır case: | | | |
|---------------------------------|---------------------------|---|----------------------------|--|-----------------------------|
| Debtor 1 | Houston Lamar | Hutto | | | |
| | First Name | Middle Name Last Name | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name Last Name | | | |
| United States Bar | nkruptcy Court for the | SOUTHERN DISTRICT OF MISSISSIPPI | | | |
| Case number | | | | | if this is an led filing |
| Official Form Schedule | | Who Have Claims Secur | ed by Property | y | 12/15 |
| | | If two married people are filing together, both are out, number the entries, and attach it to this form | | | |
| 1. Do any creditors | have claims secured by | y your property? | | | |
| ☐ No. Check | this box and submit t | his form to the court with your other schedules | . You have nothing else to | report on this form. | |
| Yes Fill in | all of the information | helow | | | |
| | | bolow. | | | |
| • | I Secured Claims | | . Column A | Column B | Column C |
| for each claim. If me | ore than one creditor has | more than one secured claim, list the creditor separa a particular claim, list the other creditors in Part 2. A cal order according to the creditor's name. | | Value of collateral that supports this claim | Unsecured portion |
| 2.1 Loancare | Lic | Describe the property that secures the claim: | \$85,560.00 | \$200,000.00 | \$0.00 |
| Creditor's Name | • | 88 Mag Williams Rd Heidelberg, MS 39439 Jasper County | | | |
| 3637 Sent Virginia B | ara Way each, VA 23452 | As of the date you file, the claim is: Check all that apply. Contingent | _ | | |
| Number, Street, | City, State & Zip Code | ☐ Unliquidated | | | |
| Who owes the de | bt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only □ Debtor 2 only | | ☐ An agreement you made (such as mortgage or car loan) | secured | | |
| Debtor 1 and De | htor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien | ١ | | |
| _ | ne debtors and another | ☐ Judgment lien from a lawsuit |) | | |
| Check if this cla | aim relates to a | Other (including a right to offset) Mortgag | je | | |
| | Opened 09/19 Last | | | | |

Date debt was incurred 3/03/25

8793

Last 4 digits of account number

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| Debtor 1 Houston L | ∟amar Hutto | | Case n | Case number (if known) | | | | | |
|---|--------------------------------------|---|----------|------------------------|-------------|------------|--|--|--|
| First Name | Middle Na | ame Last Name | | | | | | | |
| 2.2 Sunbelt Feder | al CU | Describe the property that secures the cl | aim: | \$28,228.00 | \$19,080.00 | \$9,148.00 | | | |
| Creditor's Name | | 2019 Chevrolet Camaro 81670 m | niles | | | · | | | |
| Attn: Bankrup 6885 Us Hwy 4 Hattiesburg, N | 49 | As of the date you file, the claim is: Check apply. ☐ Contingent | all that | | | | | | |
| Number, Street, City, S | State & Zip Code | ☐ Unliquidated | | | | | | | |
| Who owes the debt? | Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | | | | |
| ☐ Debtor 1 only ☐ Debtor 2 only | | ☐ An agreement you made (such as mortgage or secured car loan) | | | | | | | |
| Debtor 1 and Debtor 2 | ? only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | | | | | |
| At least one of the deb | otors and another | ☐ Judgment lien from a lawsuit | | | | | | | |
| ☐ Check if this claim relates to a community debt | | Other (including a right to offset) | | | | | | | |
| Date debt was incurred | Opened 05/24 Last Active 02/25 | Last 4 digits of account number | L200 | | | | | | |
| | | | | | | | | | |
| Add the dollar value of | f your entries in C | olumn A on this page. Write that number h | ere: | \$113,788.0 | 0 | | | | |
| If this is the last page Write that number here | | the dollar value totals from all pages. | | \$113,788.0 | 0 | | | | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| Fill ir | n this inform | ation to identify your | case: | | | | | | |
|----------------------------|--|---|---|-----------------------------------|----------------------------------|------------------------------|--|----------------------------|---|
| Debte | or 1 | Houston Lamar H | lutto | | | | | | |
| 2021 | | First Name | Middle Name | | Last Name | | | | |
| Debte | | | | | | | | | |
| (Spous | e if, filing) | First Name | Middle Name | | Last Name | | | | |
| Unite | d States Ban | kruptcy Court for the: | SOUTHERN DI | STRICT OF I | MISSISSIPPI | | | | |
| | | | | | | | | | |
| (if knov | number | | | | | | | | Check if this is an |
| ` | , | | | | | | | _ | amended filing |
| | | | | | | | | | Ŭ |
| Offic | cial Form | 106E/F | | | | | | | |
| Sch | edule E/ | F: Creditors W | ho Have U | nsecure | d Claims | | | | 12/15 |
| Sched Sched left. At | ule G: Executo ule D: Credito tach the Conti and case num | ory Contracts and Unexp rs Who Have Claims Sec | ired Leases (Officia ured by Property. It je. If you have no ir | al Form 106G) f more space i | . Do not include is needed, copy | any creditor the Part you | s with partially se need, fill it out, no | cured claim umber the e | sial Form 106A/B) and on s that are listed in ntries in the boxes on the itional pages, write your |
| | | s have priority unsecure | | nu2 | | | | | |
| _ | No. Go to Pa | | u ciainis against ye | , u : | | | | | |
| | _ | III Z. | | | | | | | |
| L | Yes. | | | | | | | | |
| Part : | 2: List All | of Your NONPRIORIT | Y Unsecured Cla | aims | | | | | |
| 3. D | o any creditor | s have nonpriority unsec | cured claims agains | st you? | | | | | |
| Г | No You have | e nothing to report in this p | art Submit this form | to the court wi | ith your other sch | edules | | | |
| _ | _ | o nouning to report in une p | a.u. G ab u | 10 1110 00011 111 | your ourer com | , au. 00. | | | |
| • | Yes. | | | | | | | | |
| ui th | nsecured claim | nonpriority unsecured cl , list the creditor separately r holds a particular claim, l | y for each claim. For | each claim list | ted, identify what | ype of claim i | t is. Do not list clair | ns already in | cluded in Part 1. If more |
| | ait Z. | | | | | | | | Total claim |
| 4.1 | GreenSk | v | l as | at 4 digits of a | ccount number | 6823 | | | \$9,532.00 |
| | | Creditor's Name | | n 4 aigito oi a | | 0020 | | | Ψ3,332.00 |
| | | nkruptcy | | | | | 07/22 Last A | ctive | |
| | 5565 Gle Ste 700 | enridge Connect | Wh | en was the de | ebt incurred? | 2/23/25 | | | _ |
| | | GA 30342 | | | | | | | |
| | | eet City State Zip Code | As | of the date yo | u file, the claim | is: Check all t | that apply | | |
| | Who incurr | red the debt? Check one. | | | | | | | |
| | ■ Debtor 1 | l only | | Contingent | | | | | |
| | Debtor 2 | 2 only | | Unliquidated | | | | | |
| | Debtor 1 | and Debtor 2 only | | Disputed | | | | | |
| | ☐ At least | one of the debtors and an | other Typ | e of NONPRI | ORITY unsecure | d claim: | | | |
| | ☐ Check i | f this claim is for a comi | munity — | Student loans | | | | | |
| | debt Is the clain | n subject to offset? | | Obligations ari ort as priority o | | ration agreer | nent or divorce that | t you did not | |
| | ■ No | | | Debts to pensi | on or profit-sharin | g plans, and | other similar debts | | |
| | ☐ Yes | | - | Other. Specify | Unsecured | | | | |
| | | | | | | | | | |

| Debtor 1 | Houston | Lamar Hutto | | Case nu | Imber (if known) | | | | | |
|---------------------------------|------------------------------------|------------------------------------|--|---------------|--|-----------------------|--|--|--|--|
| | Keesler FC | | Last 4 digits of account number | 0001 | | \$26,696.00 | | | | |
| | Nonpriority Cre | | | | 1.00/00 1.01 4.11 | | | | | |
| | Attn: Bankr 2602 Pass I | | When was the debt incurred? | Oper 08/24 | ned 06/22 Last Active | | | | | |
| | Biloxi, MS 3 | | When was the dept incurred? | 00/24 | <u> </u> | | | | | |
| | | City State Zip Code | As of the date you file, the claim | is: Check | all that apply | | | | | |
| ١ | Who incurred | the debt? Check one. | | | | | | | | |
| I | Debtor 1 on | ly | ☐ Contingent | | | | | | | |
| [| Debtor 2 on | lv | ☐ Unliquidated | | | | | | | |
| _ | | d Debtor 2 only | ☐ Disputed | | | | | | | |
| | | of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | | |
| _ | | is claim is for a community | ☐ Student loans | | | | | | | |
| | debt | is claim is for a community | Obligations arising out of a sep | aration an | reement or divorce that you did not | | | | | |
| Is the claim subject to offset? | | bject to offset? | report as priority claims | aration ag | roomone or arvoroo that you are not | | | | | |
| ■ No | | | Debts to pension or profit-shari | ng plans, | and other similar debts | | | | | |
| Yes | | | Other. Specify Repossess | sion De | ficiency | | | | | |
| 4.3 | Sunbelt Fed | doral CII | Last 4 digits of account number | 1 102 | | \$12,009,00 | | | | |
| | Nonpriority Cre | | | L102 | | \$13,008.00 | | | | |
| | Attn: Bankr | | | | ned 05/24 Last Active | | | | | |
| | 6885 Us Hw | • | When was the debt incurred? | 02/25 | j | | | | | |
| | | g, MS 39402 City State Zip Code | As of the date you file, the claim | is: Check | all that apply | | | | | |
| | | the debt? Check one. | 7.6 of the date you me, the claim | 10. 011001 | t an that apply | | | | | |
| ı | Debtor 1 on | lv | ☐ Contingent | | | | | | | |
| | Debtor 2 on | • | Unliquidated | | | | | | | |
| _ | _ | d Debtor 2 only | ☐ Disputed | | | | | | | |
| _ | | of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | | | |
| | | is claim is for a community | ☐ Student loans | | | | | | | |
| c | debt | • | ☐ Obligations arising out of a separation agreement or divorce that you did not | | | | | | | |
| _ | s the claim su ■ No | bject to offset? | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| | ⊒ Yes | | Other. Specify Unsecured | | | | | | | |
| | | | - Other. Specify | | | | | | | |
| Part 3: | | s to Be Notified About a De | | | | | | | | |
| is trying have m | g to collect fro ore than one o | om you for a debt you owe to so | omeone else, list the original creditor in tat you listed in Parts 1 or 2, list the add | n Parts 1 | dy listed in Parts 1 or 2. For example, if or 2, then list the collection agency her editors here. If you do not have addition | re. Similarly, if you | | | | |
| Name and | d Address | | On which entry in Part 1 or Part 2 did you | list the o | riginal creditor? | | | | | |
| | on Law Fir | | Line <u>4.2</u> of (<i>Check one</i>): | Part 1: 0 | Creditors with Priority Unsecured Claims | | | | | |
| - | wood Circle | | | Part 2: | Creditors with Nonpriority Unsecured Clair | ms | | | | |
| riowoo | d, MS 3923 | 02 | Last 4 digits of account number | | | | | | | |
| | | | | | | | | | | |
| Part 4: | Add the A | mounts for Each Type of U | nsecured Claim | | | | | | | |
| | e amounts of unsecured cla | | ims. This information is for statistical | reporting | purposes only. 28 U.S.C. §159. Add the | amounts for each | | | | |
| | | | | | Total Claim | | | | | |
| | 6a. | Domestic support obligation | s | 6a. | \$ 0.00 | | | | | |
| Total | | | | | | | | | | |
| claims from Part | 1 6b. | Taxes and certain other debt | s you owe the government | 6b. | \$ 0.00 | | | | | |
| | 6c. | | injury while you were intoxicated | 6c. | \$ 0.00 | | | | | |
| | 6d. | • | secured claims. Write that amount here. | 6d. | \$ 0.00 | | | | | |
| | | | | | | 1 | | | | |
| | 6e. | Total Priority. Add lines 6a thr | ough 6d. | 6e. | \$ 0.00 | | | | | |

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Debtor 1 Houston Lamar Hutto

Case number (if known)

| | | | | Total Claim |
|--------------|-----|---|-----|-----------------|
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 49,236.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 49,236.00 |

| Fill in this infor | rmation to identify your | | | | |
|---------------------|--------------------------|-------------------|----------------|--|-----------------------|
| Debtor 1 | Houston Lamar H | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF MISSISSIPPI | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| ı | Person or | company with Name, Number | whom you have the , Street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|--|---------------------|---|
| 2.1 | | | · | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | • | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | <u> </u> |

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| Fill in thi | is information to identify your | case: | | | |
|---------------------------------------|---|---|--|--|--|
| Debtor 1 | Houston Lamar I | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, f | | Middle Name | Last Name | | |
| United St | tates Bankruptcy Court for the: | SOUTHERN DISTRICT | OF MISSISSIPPI | | |
| Case nur | mber | | | | ☐ Check if this is an amended filing |
| | al Form 106H <mark>dule H: Your Co</mark> d | ebtors | | | 12/15 |
| people ar fill it out, your nam | e filing together, both are equ | ally responsible for supple boxes on the left. Attach). Answer every question. | lying correct information the Additional Page to | n. If more space is r this page. On the to | ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write |
| □ No | | | | | |
| | ithin the last 8 years, have you ona, California, Idaho, Louisiana | | | | |
| ■ No | o. Go to line 3. | | | | |
| ☐ Ye | es. Did your spouse, former spo | use, or legal equivalent live | with you at the time? | | |
| in lir Forn | ne 2 again as a codebtor only | if that person is a guarant | or or cosigner. Make su | ire you have listed t | g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt es that apply: |
| 3.1 | Kelsey Brownlee 88 Mag Williams Rd Heidelberg, MS 39439 | | | ■ Schedule D, I □ Schedule E/F □ Schedule G _ Sunbelt Federa | , line |

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

| E:II | : 4h :- : | | | | | | 1 | | | | |
|-------------|---|-----------------------------|----------------------|------------------------|-----------|------|------------|--------------|----------------|------------|-------------|
| | in this information to identify your obtor 1 Houston La | | | | | | | | | | |
| 1 | btor 2 | | | | | _ | | | | | |
| ' | ited States Bankruptcy Court for the | e: SOUTHERN DISTRIC | CT OF MIS | SSISSIPPI | | | | | | | |
| | se number nown) | | - | | | | | | | | |
| 0 | fficial Form 106I | | | | | | Ī | MM / DD/ Y | YYY | | |
| S | chedule I: Your Inc | ome | | | | | | | | | 12/15 |
| spo atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment Fill in your employment | ur spouse is not filing w | ith you, d | o not inclu | de infor | mati | on abou | t your spo | ouse. If mor | e space | is needed, |
| ١. | information. | | Debtor | 1 | | | | Debtor 2 | or non-fili | ng spous | se |
| | If you have more than one job, attach a separate page with | Employment status | ■ Employed | | | | ☐ Emplo | • | | | |
| | information about additional employers. | | ☐ Not employed | | | | | ☐ Not e | mployed | | |
| | | Occupation | Projec | t Superin | tenden | t | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Walters Construction | | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | Hwy 84 E I, MS 3944 | 13 | | | | | | |
| | | How long employed t | here? | 8 Years | S | | | _ | | | |
| Pa | rt 2: Give Details About Mo | nthly Income | | | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | late you file this form. If | you have | nothing to r | eport for | any | line, writ | e \$0 in the | space. Inclu | ıde your ı | non-filing |
| | ou or your non-filing spouse have m e space, attach a separate sheet to | | ombine th | e informatio | n for all | empl | oyers for | that perso | on on the line | es below. | If you need |
| | | | | | | | For De | btor 1 | For Debt | | 9 |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | | 2. | \$ | 5 | 5,958.33 | \$ | N/ | A |
| 3. | Estimate and list monthly over | time pay. | | | 3. | +\$ | | 0.00 | +\$ | N/ | <u>A</u> |

Official Form 106I Schedule I: Your Income page 1

4. Calculate gross Income. Add line 2 + line 3.

5,958.33

N/A

| Deb | tor 1 | Houston Lamar Hutto | - | C | Case number (if k | (nown) | | | | |
|-----|-----------------------------|---|------|------------|-------------------|--------|-----------|----------------|----------------|------------------|
| | | | | | For Debtor 1 | | | Debtor : | | |
| | Cop | by line 4 here | 4. | | \$5,95 | 8.33 | \$ | | N/A | <u> </u> |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | à. | \$ 1,37 | 0.42 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b |). | | 0.00 | \$ | | N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c |) . | \$ | 0.00 | \$ | | N/A | <u> </u> |
| | 5d. | Required repayments of retirement fund loans | 5d | ı. | | 0.00 | \$ | | N/A | <u> </u> |
| | 5e. | Insurance | 5e | | | 0.00 | \$ | | N/A | _ |
| | 5f. | Domestic support obligations | 5f. | | | 0.00 | \$ | | N/A | _ |
| | 5g. 5h. | Union dues Other deductions. Specify: | 5g | | . — | 0.00 | * + \$ | | N/A | _ |
| _ | | · · · · · · · · · · · · · · · · · · · | _ | | · ——— | | · — | | N/A | _ |
| 6. | | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$ <u>1,37</u> | | \$ | | N/A | _ |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$\$ | 7.91 | \$ | | N/A | <u>.</u> |
| 8. | List 8a. | All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a | . | \$ | 0.00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b | | | 0.00 | \$- | | N/A | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 80 |). | | 0.00 | \$ | | N/A | _ |
| | 8d. | Unemployment compensation | 8d | | · | 0.00 | \$ | | N/A | _ |
| | 8e. | Social Security | 8e | €. | | 0.00 | \$ | | N/A | \ |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | | 0.00 | \$ | | N/A | _ |
| | 8g. | Pension or retirement income | 8g | | | 0.00 | \$ | | N/A | _ |
| | 8h. | Other monthly income. Specify: | _ 8h | 1.+ | \$ | 0.00 | + \$ | | N/A | <u> </u> |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | S | 0.00 | \$ | | N/ | A |
| 10 | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | 4,587.91 | + \$ | | N/A | = \$ | 4,587.91 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | Ψ- | 7,307.31 | | | 17/7 | _ | 4,307.31 |
| 11. | Star Incli othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify: | depe | | | | | chedule 11. | | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies | | | | | | 12. | \$ | 4,587.91 |
| 13. | Do | you expect an increase or decrease within the year after you file this form | ? | | | | | L | Combi month | ned ly income |
| | - | No. Yes Explain: | | | | | | | | |

Official Form 106l Schedule I: Your Income page 2

| Fill | in this information to identify your case: | | | | |
|------------|--|--|-------------|---|---|
| Deb | otor 1 Houston Lamar Hutto | | Chec | k if this is: | |
| | otor 2 | | | An amended filing A supplement show 13 expenses as of t | ving postpetition chapter the following date: |
| Unit | ted States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSIS | SSIPPI | = | MM / DD / YYYY | |
| Cas | e number | | | | |
| (If k | nown) | | | | |
| O. | fficial Form 106J | | | | |
| S | chedule J: Your Expenses | | | | 12/15 |
| Be info | as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this full mber (if known). Answer every question. | | | | |
| | t 1: Describe Your Household Is this a joint case? | | | | |
| 1. | No. Go to line 2. | | | | |
| | Yes. Does Debtor 2 live in a separate household? | | | | |
| | ☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i> | for Separate Househ | old of Debt | or 2. | |
| 2. | Do you have dependents? ☐ No | | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor 2 | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| | dependents names. | Daughter | | 3 | Yes |
| | | Son | | 5 | □ No ■ Yes |
| | | | | | □ No |
| | | | | | ☐ Yes |
| | | | | | □ No |
| 3. | Do your expenses include ■ No | | | | ☐ Yes |
| | expenses of people other than yourself and your dependents? | | | | |
| Est | Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless yourness as of a date after the bankruptcy is filed. If this is a suppliblicable date. | | | | |
| the | lude expenses paid for with non-cash government assistance if value of such assistance and have included it on Schedule I: Yoficial Form 106I.) | | | Your expe | enses |
| 4. | The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot. | nclude first mortgage | 4. \$ | | 667.93 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | 4a. \$ | | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ | | 138.00 |
| 5 | 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as hor | ne equity loans | 4d. \$ | | 0.00 |

| Debtor 1 H | ouston Lamar Hutto | Case num | ber (if known) | |
|-------------------------------|--|---------------|----------------|--------------------------|
| - دالناللا د | | | | |
| 6. Utilities 6a. El | : ectricity, heat, natural gas | 6a. | \$ | 300.00 |
| | ater, sewer, garbage collection | 6b. | | 40.00 |
| | | | · | |
| | elephone, cell phone, Internet, satellite, and cable services | 6c. 6d. | \$ | 290.00 |
| | ther. Specify: | | · | 0.00 |
| | d housekeeping supplies | 7. | \$ | 1,060.00 |
| | re and children's education costs | 8. | \$ | 100.00 |
| | g, laundry, and dry cleaning | 9. | \$ | 187.00 |
| | al care products and services | 10. | · ———— | 87.00 |
| | and dental expenses | 11. | \$ | 100.00 |
| | ortation. Include gas, maintenance, bus or train fare. | 10 | œ. | 250.00 |
| | nclude car payments. | 12. | \$ | |
| | nment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 75.00 |
| | ole contributions and religious donations | 14. | \$ | 0.00 |
| 5. Insuran | | | | |
| | nclude insurance deducted from your pay or included in lines 4 or 20. | | • | |
| | fe insurance | 15a. | · | 97.26 |
| | ealth insurance | 15b. | : | 100.00 |
| 15c. Ve | ehicle insurance | 15c. | \$ | 0.00 |
| 15d. O | ther insurance. Specify: | 15d. | \$ | 0.00 |
| 6. Taxes. [| Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| Specify: | | 16. | \$ | 0.00 |
| 7. Installm | ent or lease payments: | | - | |
| 17a. C | ar payments for Vehicle 1 | 17a. | \$ | 0.00 |
| 17b. C | ar payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 17c. O | ther. Specify: | 17c. | \$ | 0.00 |
| | ther. Specify: | 17d. | \$ | 0.00 |
| | yments of alimony, maintenance, and support that you did not report | as | · | |
| | d from your pay on line 5, Schedule I, Your Income (Official Form 106) | | \$ | 0.00 |
| | ayments you make to support others who do not live with you. | • | \$ | 0.00 |
| Specify: | | 19. | · | |
| | eal property expenses not included in lines 4 or 5 of this form or on Sc | hedule I: Yo | ur Income. | |
| | ortgages on other property | 20a. | | 0.00 |
| | eal estate taxes | 20b. | \$ | 0.00 |
| | operty, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| | aintenance, repair, and upkeep expenses | 20d. | · | 0.00 |
| | omeowner's association or condominium dues | 20a. | \$ | 0.00 |
| | | | · | |
| 1. Other: 9 | · · · · <u> </u> | 21. | | 50.00 |
| Misc E | xpenses (IRS Standards) | | +\$ | 300.00 |
| 2 Calcula | te your monthly expenses | | | |
| | d lines 4 through 21. | | \$ | 3,842.19 |
| | by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 |) | \$ | 3,042.13 |
| | | <u> </u> | · | |
| 22c. Add | I line 22a and 22b. The result is your monthly expenses. | | \$ | 3,842.19 |
| 3. Calculat | te your monthly net income. | | | |
| | opy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 4,587.91 |
| | opy your monthly expenses from line 22c above. | 23b. | | 3,842.19 |
| 20D. C | by your monthly expenses nominate 220 above. | ۷۵۵. | Ψ | 3,042.19 |
| 230 81 | ubtract your monthly expenses from your monthly income. | | | |
| | ne result is your <i>monthly net income</i> . | 23c. | \$ | 745.72 |
| 11 | io rosaicio your monuny nocinicomo. | | | |
| 4. Do vou | expect an increase or decrease in your expenses within the year after | vou file this | form? | |
| | ple, do you expect to finish paying for your car loan within the year or do you expect y | | | or decrease because of a |
| | on to the terms of your mortgage? | - 3-3-1 | | |
| ■ No. | | | | |
| ☐ Yes. | Explain here: | | | |

| Cill in A | hio informatio | n to identify your | | | | | | |
|--------------------------------|--|----------------------------|------------------------|---------------|-------------------|--|---|-------|
| | | n to identify your | | | | | | |
| Debtor | | ouston Lamar H rst Name | Middle Name | L | ast Name | | | |
| Debtor | | or riams | madic Hame | _ | aorramo | | | |
| (Spouse it | | st Name | Middle Name | L | ast Name | | | |
| United | States Bankrup | otcy Court for the: | SOUTHERN DISTR | ICT OF MISS | SSIPPI | | | |
| Case n | umber | | | | | | | |
| (if known) | | | | | | | ☐ Check if this is ar | 1 |
| | | | | | | | amended filing | |
| If two m You mu obtainir | narried people st file this forn ng money or p | are filing togethe | n connection with a b | sponsible for | supplying corre | ect information. Making a false sta | atement, concealing property 000, or imprisonment for up | |
| years, o | Sign Bel | | 519, and 5571. | | | | | |
| Di | d you pay or a | ngree to pay some | one who is NOT an a | ttorney to he | p you fill out ba | ankruptcy forms? | | |
| | No | | | | | | | |
| | Yes. Name | of person | | | | | ankruptcy Petition Preparer's N on, and Signature (Official Forn | |
| | | | | | | | , , | 1110) |
| | der penalty of it they are true | | that I have read the s | summary and | schedules filed | with this declara | tion and | |
| х | /s/ Houston | Lamar Hutto | |) | | | | |
| | Houston La | | | | Signature of D | Debtor 2 | | |
| | Signature of [| Debtor 1 | | | | | | |
| | Date April | 9, 2025 | | | Date | | | |

| Fill | Lin this inform | nation to identify you | r casa: | | | | | | | | | |
|-------------------|----------------------------|---|--|---|---|---|--|--|--|--|--|--|
| | btor 1 | Houston Lamar | | | | | | | | | | |
| | DIOI I | First Name | Middle Name | Last Name | | | | | | | | |
| 1 - | btor 2 ouse if, filing) | First Name | Middle Name | Last Name | | | | | | | | |
| Un | ited States Ba | nkruptcy Court for the: | SOUTHERN DISTRICT O | OF MISSISSIPPI | | | | | | | | |
| Ca | se number | | | | | | | | | | | |
| | nown) | | | | | Check if this is an mended filing | | | | | | |
| \sim | α: -: - 1 □ - | 407 | | | | | | | | | | |
| | fficial Fo atement | | Affairs for Individ | duals Filing for B | ankruptcy | 04/25 | | | | | | |
| info | rmation. If m | | attach a separate sheet to | | equally responsible for sup y additional pages, write you | | | | | | | |
| Pa | rt 1: Give D | Details About Your Ma | arital Status and Where You | Lived Before | | | | | | | | |
| 1. | What is you | r current marital statu | ıs? | | | | | | | | | |
| | ☐ Married ■ Not mar | | | | | | | | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | where you live now? | | | | | | | | |
| | ■ No | | • | • | | | | | | | | |
| | _ | Yes. List all of the places you lived in the last 3 years. Do not include where you live now. | | | | | | | | | | |
| | Debtor 1: | | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | | | | | |
| 3. stat | | | | | ity property state or territory ico, Texas, Washington and W | | | | | | | |
| | ■ No | | | | | | | | | | | |
| | ☐ Yes. Ma | ake sure you fill out <i>Scl</i> | nedule H: Your Codebtors (Of | fficial Form 106H). | | | | | | | | |
| Pa | rt 2 Explai | n the Sources of You | r Income | | | | | | | | | |
| 4. | Fill in the tota | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part- | | ndar years? | | | | | | |
| | □ No | | | | | | | | | | | |
| | Yes. Fill | l in the details. | | | | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | | | |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$15,125.00 | ☐ Wages, commissions, bonuses, tips | | | | | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | | | | |

Official Form 107

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| Debtor 1 F | louston Lamar | Hutto | | Cas | e number (if known) | | |
|-------------------------------|--|--|--|--|---|--|---|
| | | | | | | | |
| | | Debtor 1 | | | Debtor 2 | | |
| | | | of income that apply. | Gross income (before deductions and exclusions) | Sources of inc Check all that a | | Gross income (before deductions and exclusions) |
| For last cale (January 1 t | endar year: to December 31, 2 | ■ Wage bonuses, | s, commissions, tips | \$75,671.00 | ☐ Wages, combonuses, tips | missions, | |
| | | ☐ Opera | ting a business | | Operating a | business | |
| | endar year before to December 31, 2 | | s, commissions, tips | \$77,453.00 | ☐ Wages, com bonuses, tips | missions, | |
| | | ☐ Opera | iting a business | | ☐ Operating a | business | |
| winnings List each | s. If you are filing a | joint case and you ross income from ea | have income that y | est; dividends; money collectory received together, list it constituted together. It is the complex to the constitute income the con | only once under De | ebtor 1. | d gambling and lottery |
| | | Debtor 1 | | | Debtor 2 | | |
| | | | of income below. | Gross income from each source (before deductions and exclusions) | Sources of inc Describe below | | Gross income (before deductions and exclusions) |
| Part 3: Li | st Certain Payme | ents You Made Bef | ore You Filed for E | Bankruptcy | | | |
| □ No | Neither Debto individual prima During the 90 c No. Go Yes Lis pa no * Subject to ac s. Debtor 1 or De During the 90 c No. Go ■ Yes Lis inc | arily for a personal, in days before you filed to line 7. In the below each creditor, but the creditor. Do not include payments in the dijustment on 4/01/28 abtor 2 or both have days before you filed to line 7. In the below each creditor. | as primarily consustantly, or household for bankruptcy, did not include payment to an attorney for the and every 3 years are primarily consust for bankruptcy, did not to whom you paid on the support of | mer debts. Consumer debts d purpose." d you pay any creditor a total d a total of \$8,575* or more is ts for domestic support oblighis bankruptcy case. Is after that for cases filed on | I of \$8,575* or more pay pations, such as che or after the date of the following of \$600 or more? | re? ments and the support and the support and support | ne total amount you nd alimony. Also, do |
| Credito | or's Name and Ad | dress | Dates of paymen | nt Total amount | Amount you still owe | Was this p | payment for |
| Only r | egular installm | ent payments. | | \$0.00 | \$0.00 | ☐ Mortgag ☐ Car ☐ Credit C ☐ Loan Re ☐ Supplie ☐ Other_ | Card |

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| DUL | nousion Lamai nullo | | | c namber (# known) | | |
|-----|--|--|--|---|-----------------------------------|--|
| | | | | | | |
| 7. | Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. | artners; relatives of any gen control, or owner of 20% of | neral partners; partners or more of their voting | erships of which yog g securities; and a | ou are a genera ny managing ag | I partner; corporations gent, including one for |
| | ■ No□ Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for t | this payment |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos | | • | | ccount of a de | bt that benefited an |
| | ■ No | | | | | |
| | Yes. List all payments to an insider | D | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Include credi | t his payment tor's name |
| Par | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| | modifications, and contract disputes. No Yes. Fill in the details. Case title Case number | Nature of the case | Court or agency | | Status of the | e case |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. | | erty repossessed, f | oreclosed, garni | shed, attached | , seized, or levied? |
| | Yes. Fill in the information below. | | | Date | | V 1 (4) |
| | Creditor Name and Address | Describe the Property Explain what happened | | | | Value of the property |
| | Keesler FCU Attn: Bankruptcy | 2019 Chevrolet Taho | | 09/2 | 024 | \$27,000.00 |
| | 2602 Pass Rd | ■ Property was reposs | essed. | | | |
| | Biloxi, MS 39531 | Property was foreclo | | | | |
| | | ☐ Property was garnished. | | | | |
| | | ☐ Property was attache | ed, seized or levied. | | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No ☐ Yes. Fill in the details. | | cluding a bank or fil | nancial institutio | n, set off any a | mounts from your |
| | Creditor Name and Address | Describe the action the | e creditor took | Date takei | action was า | Amount |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes | | erty in the possess | ion of an assigne | e for the bene | fit of creditors, a |

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| De | htor 1 Houston Lamar Hutto | Case number | (if known) | |
|-----|--|--|---|---------------------------|
| | | | | |
| Pa | tt 5: List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift. | r, did you give any gifts with a total value of more t | han \$600 per person? | ? |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | |
| 14. | Within 2 years before you filed for bankruptcy ■ No | , did you give any gifts or contributions with a tota | al value of more than | \$600 to any charity? |
| | Yes. Fill in the details for each gift or contrib | ution. | | |
| | Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | Describe what you contributed | Dates you contributed | Value |
| Pa | tt 6: List Certain Losses | | | |
| 15. | Within 1 year before you filed for bankruptcy or gambling? | or since you filed for bankruptcy, did you lose any | thing because of thef | t, fire, other disaster, |
| | ■ No □ Yes. Fill in the details. | | | |
| | how the loss occurred Inclu | cribe any insurance coverage for the loss de the amount that insurance has paid. List pending rance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Pa | tt 7: List Certain Payments or Transfers | | | |
| 16. | consulted about seeking bankruptcy or prepa | did you or anyone else acting on your behalf pay ring a bankruptcy petition? ers, or credit counseling agencies for services require | | rty to anyone you |
| | □ No | | | |
| | Yes. Fill in the details. | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | The Rollins Law Firm, PLLC P.O. Box 13767 Jackson, MS 39236 trollins@therollinsfirm.com | Filing fee, attorney fee, credit report and credit counseling | 03/147/2025 \$650 | \$1,500.00 |
| 17. | Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you I | | or transfer any prope | rty to anyone who |
| | ■ No | | | |
| | Yes. Fill in the details. | | | |
| | Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was | Amount of payment |

Debtor 1 Houston Lamar Hutto

Case number (if known)

| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. | | | | | | | | |
|-----|---|---|----------------------------|----------------|---|---|--|--|--|
| | Yes. Fill in the details. Person Who Received Transfer Address | Description and ventoring property transferr | | | any property or s received or debts | Date transfer was made | | | |
| | Person's relationship to you | | | paid iii ex | Citalige | | | | |
| 19. | Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote No Yes. Fill in the details. | | y property to a se | elf-settled tr | ust or similar device o | of which you are a | | | |
| | Name of trust | Description and v | alue of the prope | rty transferr | red | Date Transfer was | | | |
| | | | | | | made | | | |
| Par | rt 8: List of Certain Financial Accounts, Instr | uments, Safe Deposit | Boxes, and Stora | age Units | | | | | |
| 20. | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or | · | | | • | | | | |
| | houses, pension funds, cooperatives, associa No Yes. Fill in the details. | ations, and other finan | cial institutions. | | | | | | |
| | | ast 4 digits of account number | Type of account instrument | clo | nte account was osed, sold, oved, or onsferred | Last balance before closing or transfer | | | |
| 21. | Do you now have, or did you have within 1 yearsh, or other valuables? | ar before you filed for | bankruptcy, any | safe deposi | it box or other deposi | tory for securities, | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had according Address (Number, State and ZIP Code) | | escribe the | contents | Do you still have it? | | | |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, St State and ZIP Code) | | escribe the | contents | Do you still have it? | | | |
| Par | rt 9: Identify Property You Hold or Control fo | or Someone Else | | | | | | | |
| 23. | | | ıde any property | you borrow | ed from, are storing fo | or, or hold in trust | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, St Code) | | escribe the | property | Value | | | |
| Par | rt 10: Give Details About Environmental Inform | mation | | | | | | | |
| For | the purpose of Part 10, the following definition | ıs apply: | | | | | | | |

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy
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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 Houston Lamar Hutto

Case number (if known)

| Par | | nber, Street, City, State and ZIP Code) | | | | | | | |
|-----|---|--|--------|---|-------|------------------------------------|-----------------------|--|--|
| | | dress | Dat | e Issued | | | | | |
| | | Yes. Fill in the details below. | | | | | | | |
| 20. | | itutions, creditors, or other parties. | icy, a | iu you give a illialiciai statement | io ar | iyone about your business? Incit | uue dii iiiidiiCidi | | |
| 28 | | nin 2 years before you filed for bankrupt | | , | to ar | Dates business existed | ıde all financial | | |
| | Ad | dress https://dress.action.org/dress.act | | ne of accountant or bookkeeper | | Do not include Social Security | | | |
| | ⊔ B∷ | Yes. Check all that apply above and fill siness Name | | e details below for each busines: scribe the nature of the business | S. | Employer Identification numbe | _ | | |
| | | No. None of the above applies. Go to I | | | _ | | | | |
| | _ | An owner of at least 5% of the votin | • | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | | |
| | | A member of a limited liability comp | pany (| (LLG) or illilited liability partnersh | nb (r | ·LF) | | | |
| | | A sole proprietor or self-employed i | | | | • | | | |
| 27. | Witl | nin 4 years before you filed for bankrupt | - | • | - | - | / business? | | |
| - | | _ | | • | | | | | |
| Par | + 11- | Give Details About Your Business or | Conr | State and ZIP Code) | | | | | |
| | | se Title se Number | | Court or agency Name Address (Number, Street, City, | Nat | ture of the case | Status of the case | | |
| | | | | | | | | | |
| 26. | Hav | e you been a party in any judicial or adr | minis | trative proceeding under any env | ironr | mental law? Include settlements a | and orders. | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | | Governmental unit Address (Number, Street, City, State an ZIP Code) | ıd | Environmental law, if you know it | Date of notice | | |
| | | No Yes. Fill in the details. | | | | | | | |
| 25. | Hav | e you notified any governmental unit of | any | zip Code) release of hazardous material? | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | | Governmental unit Address (Number, Street, City, State an | ıd | Environmental law, if you know it | Date of notice | | |
| | | No Yes. Fill in the details. | | | | | | | |
| 24. | Has | any governmental unit notified you tha | t you | may be liable or potentially liable | und | der or in violation of an environm | ental law? | | |
| Rep | ort a | II notices, releases, and proceedings th | at yo | u know about, regardless of whe | n the | ey occurred. | | | |
| | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. | | | | | | | | |
| _ | to own, operate, or utilize it, including disposal sites. | | | | | | | | |
| | _ | alations controlling the cleanup of these means any location, facility, or propert | | | law. | whether you now own, operate. | or utilize it or used | | |

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

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| Debtor 1 | Houston Lam | Hutto Case number (if known) |
|------------|--------------------------------|---|
| with a bar | | tand that making a false statement, concealing property, or obtaining money or property by fraud in connection esult in fines up to \$250,000, or imprisonment for up to 20 years, or both. and 3571. |
| /s/ Hous | ton Lamar Hutt | |
| | n Lamar Hutto e of Debtor 1 | Signature of Debtor 2 |
| Date A | pril 9, 2025 | Date |
| Did you at | ttach additional p | es to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| ■ No | | |
| □ Yes | | |
| Did you p | ay or agree to pay | comeone who is not an attorney to help you fill out bankruptcy forms? |
| ■ No | | |
| □ Yes Na | ame of Person | Attach the Bankruntcy Petition Preparer's Notice Declaration, and Signature (Official Form 119) |

| Fill in this information to identify your case: | | | | | | |
|---|--|--|--|--|--|--|
| Debtor 1 | Houston Lamar Hutto | | | | | |
| Debtor 2 (Spouse, if filing) | | | | | | |
| United States E | Bankruptcy Court for the: Southern District of Mississippi | | | | | |
| Case number (if known) | | | | | | |

| Check as directed in lines 17 and 21: | | | | | | | |
|---|--|--|--|--|--|--|--|
| According to the calculations required by this Statement: | | | | | | | |
| | 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). | | | | | | |
| | 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). | | | | | | |
| | 3. The commitment period is 3 years. | | | | | | |
| | 4. The commitment period is 5 years. | | | | | | |

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

| | | • | | | | | |
|----------|--|---------------------------------|-----------------------|--|--|--|-------------------------------|
| Par | 11: Calculate Your Average Monthly Income | | | | | | |
| 1. | What is your marital and filing status? Check one of | nly. | | | | | |
| | ■ Not married. Fill out Column A, lines 2-11. | | | | | | |
| | ☐ Married. Fill out both Columns A and B, lines 2-11. | | | | | | |
| 10 th | ill in the average monthly income that you received from al 01(10A). For example, if you are filing on September 15, the 6- te 6 months, add the income for all 6 months and divide the total bouses own the same rental property, put the income from that | month peri al by 6. Fill | od would in the re | l be March 1 throusult. Do not include | ugh August 31. If the am le any income amount n | ount of your monthly incom- nore than once. For example | e varied during e, if both |
| | | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| 2. | Your gross wages, salary, tips, bonuses, overtime payroll deductions). | , and cor | mmissio | ons (before all | \$5,958.33 | \$ | |
| 3. | Alimony and maintenance payments. Do not include Column B is filled in. | e paymer | nts from | a spouse if | \$ | \$ | |
| 4. | All amounts from any source which are regularly portion of you or your dependents, including child support from an unmarried partner, members of your househo and roommates. Do not include payments from a spouyou listed on line 3. | t. Include ld, your d | e regula: lepende | r contributions nts, parents, | \$ 0.00 | \$ | |
| 5. | Net income from operating a business, profession, or farm | Debtor | 1 | | | | |
| | Gross receipts (before all deductions) | \$ | 0.00 | | | | |
| | Ordinary and necessary operating expenses | - \$ | 0.00 | | | | |
| | Net monthly income from a business, profession, or fa | rm \$ | 0.00 | Copy here -> | \$ | \$ | |
| 6. | Net income from rental and other real property | Debtor | | | | | |
| | Gross receipts (before all deductions) | \$ | 0.00 | | | | |
| | Ordinary and necessary operating expenses | - \$ | 0.00 | | | _ | |
| | Net monthly income from rental or other real property | \$ | 0.00 | Copy here -> | \$ 0.00 | \$ | |

Case number (if known)

| | | | | Column A Debtor 1 | | Column B Debtor 2 or non-filing sp | pouse | |
|-------------|---|--|---|-------------------|----------|------------------------------------|----------|----------|
| 7. | Interest. d | lividends, and royalties | | \$ | 0.00 | \$ | | |
| | | ment compensation | | \$ | 0.00 | \$ | | |
| | | er the amount if you contend that the amount receiv Security Act. Instead, list it here: | red was a benefit under | | | | | |
| | For you | \$ | 0.00 | | | | | |
| | For you | r spouse \$ | | | | | | |
| 9. | Pension of benefit und not include United State disability, of pay paid uf does not e | or retirement income. Do not include any amount reder the Social Security Act. Also, except as stated in any compensation, pension, pay, annuity, or allowed the Government in connection with a disability, compor death of a member of the uniformed services. If yender chapter 61 of title 10, then include that pay only exceed the amount of retired pay to which you would not any provision of title 10 other than chapter 61 of the control of t | n the next sentence, do ance paid by the bat-related injury or ou received any retired y to the extent that it I otherwise be entitled | \$ | 0.00 | \$ | | |
| 10. | Do not incl received a domestic to United Sta disability, of | om all other sources not listed above. Specify the ude any benefits received under the Social Security is a victim of a war crime, a crime against humanity, perforism; or compensation, pension, pay, annuity, of the Government in connection with a disability, comor death of a member of the uniformed services. If not a separate page and put the total below. | Act; payments or international or r allowance paid by the bat-related injury or | | | | | |
| | | | | \$ | 0.00 | \$ | | |
| | | | | \$ | 0.00 | \$ | | |
| | T | otal amounts from separate pages, if any. | + | \$ | 0.00 | \$ | | |
| 11. Part | each colur | your total average monthly income. Add lines 2 to the nn. Then add the total for Column A to the total for Column B to the total for Deductions from It | Column B. \$ | 5,958.33 | + \$ _ | | | 5,958.33 |
| 12. 13. | Copy you | r total average monthly income from line 11the marital adjustment. Check one: | | | | | \$ | 5,958.33 |
| | _ | are not married. Fill in 0 below. | | | | | | |
| | | are married and your spouse is filing with you. Fill in | 0 helow | | | | | |
| | | are married and your spouse is not filing with you. | 0.000 | | | | | |
| | Fill in | the amount of the income listed in line 11, Column ndents, such as payment of the spouse's tax liability | | | | | | |
| | | specify the basis for excluding this income and the tments on a separate page. | e amount of income de | voted to each | purpose. | . If necessary, I | ist addi | tional |
| | If this | adjustment does not apply, enter 0 below. | _ | | | | | |
| | | | \$ | | _ | | | |
| | | | | | - | | | |
| | | | +\$ | | | | | |
| | | Total | \$ | 0.00 | Co | py here=> | | 0.00 |
| 14. | Your cur | rent monthly income. Subtract line 13 from line 12 | 2. | | _ | | \$ | 5,958.33 |
| 15. | Calculate | your current monthly income for the year. Follow | ow these steps: | | | | | |
| | 15a. Co | py line 14 here=> | | | | | \$ | 5,958.33 |

Houston Lamar Hutto

Debtor 1

| Debto | or 1 | Ηοι | ıston Lamar Hutto | | Case number (if known) | | |
|-------|-------|----------------|---|-------------------------|---|---------------|----------------|
| | | M | ultiply line 15a by 12 (the number of months in | n a year). | | X | : 12 |
| | 15 | b. T | ne result is your current monthly income for the | e year for this part o | f the form. | \$ | 71,499.96 |
| 16. | Cal | culate | e the median family income that applies to | you. Follow these st | eps: | | |
| | 16a | . Fill i | n the state in which you live. | MS | - | | |
| | 16b | . Fill i | n the number of people in your household. | 3 | _ | | |
| | 16c | To fi | n the median family income for your state and nd a list of applicable median income amount uctions for this form. This list may also be ava | s, go online using the | | \$_ | 78,140.00 |
| 17. | Hov | v do 1 | he lines compare? | | | | |
| | 17a | | Line 15b is less than or equal to line 16c. (11 U.S.C. § 1325(b)(3). Go to Part 3. Do N | | | | |
| | 17b | . [| Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 a | ulation of Your Dis | | | |
| Part | 3: | Ca | Ilculate Your Commitment Period Under 11 | U.S.C. § 1325(b)(4) | | | |
| 18. | Cop | у уо | ur total average monthly income from line 1 | 1. | | \$ | 5,958.33 |
| 19. | spo | end t use's | the marital adjustment if it applies. If you are that calculating the commitment period under fincome, copy the amount from line 13. | 1 U.S.C. § 1325(b)(| | - \$ | 0.00 |
| | | | ,aa., a.a., a.a a.a.a a.a.a | | | * | |
| | 19b | Sub | tract line 19a from line 18. | | | \$ | 5,958.33 |
| 20. | Cal | culate | your current monthly income for the year | Follow these steps | : | | |
| | 20a | Сор | y line 19b | | | \$_ | 5,958.33 |
| | | Mult | iply by 12 (the number of months in a year). | | | X | 12 |
| | 20b | . The | result is your current monthly income for the y | ear for this part of th | ne form | \$_ | 71,499.96 |
| | 20c | Сор | y the median family income for your state and | size of household fr | om line 16c | \$_ | 78,140.00 |
| | 21. | How | do the lines compare? | | | L | |
| | | | Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4. | se ordered by the co | ourt, on the top of page 1 of this form, ch | eck box 3, 7 | he commitment |
| | | | Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4. | nless otherwise orde | red by the court, on the top of page 1 of | this form, ch | eck box 4, The |
| Part | 4: | Si | gn Below | | | | |
| | By s | ignin | g here, under penalty of perjury I declare that | the information on th | is statement and in any attachments is t | rue and corr | ect. |
| Х | /s/ | Ηου | ston Lamar Hutto | | | | |
| | | | on Lamar Hutto e of Debtor 1 | | | | |
| | Date | | ril 9, 2025 | | | | |
| | If yo | | cked 17a, do NOT fill out or file Form 122C-2 | | | | |
| | If yo | u che | cked 17b, fill out Form 122C-2 and file it with | this form. On line 39 | of that form, copy your current monthly | income from | line 14 above. |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter | 7 : | Liquidation |
|----------|------------|--------------------|
| Ç | \$245 | filing fee |
| | \$78 | administrative fee |
| <u>+</u> | \$15 | trustee surcharge |
| Ş | 338 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | \$278 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | \$313 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Mississippi

| In re | Houston Lamar Hut | to | | Case No. | | | |
|-------|--|---|---|---|-------------------------------------|--|--|
| | | | Debtor(s) | Chapter | 13 | | |
| | DISCLO | SURE OF COMPEN | NSATION OF ATTORN | EY FOR DI | EBTOR(S) | | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | | | |
| | For legal services, I ha | ve agreed to accept | | \$ | 4,000.00 | | |
| | Prior to the filing of the | is statement I have received | | \$ | 272.00 | | |
| | | | | \$ | 3,728.00 | | |
| 2. | The source of the compensa | ation paid to me was: | | | | | |
| | ■ Debtor □ | Other (specify): | | | | | |
| 3. | The source of compensation | to be paid to me is: | | | | | |
| | ■ Debtor □ | Other (specify): | | | | | |
| 4. | ■ I have not agreed to sha | re the above-disclosed compe | ensation with any other person unle | ss they are mem | bers and associates of my law firm. | | |
| | | | tion with a person or persons who are sof the people sharing in the com | | | | |
| 5. | In return for the above-disc | losed fee, I have agreed to rer | nder legal service for all aspects of | the bankruptcy o | ease, including: | | |
| | b. Preparation and filing of c. Representation of the de d. [Other provisions as nee Negotiations wireaffirmation ag | any petition, schedules, state btor at the meeting of creditor ded] th secured creditors to re | ring advice to the debtor in determinent of affairs and plan which may read confirmation hearing, and are educe to market value; exempens as needed; preparation and usehold goods. | y be required; y adjourned hea tion planning; | rings thereof; | | |
| 6. | Representation | | does not include the following ser chargeability actions, judicial | | es, relief from stay actions or | | |
| | | | CERTIFICATION | | | | |
| | I certify that the foregoing is bankruptcy proceeding. | s a complete statement of any | agreement or arrangement for pay | ment to me for r | epresentation of the debtor(s) in | | |
| 1 | April 9, 2025 | | /s/ Thomas C. Rollins | s, Jr. | | | |
| Date | | Thomas C. Rollins, J | | | | | |
| | | | Signature of Attorney The Rollins Law Firn | n. PLLC | | | |
| | | | P.O. Box 13767 | ., | | | |
| | | | Jackson, MS 39236 601-500-5533 Fax: 6 | ᲘᲘ -ᲜᲘᲘ-ᲜᲔᲔᲜ | | | |
| | | | trollins@therollinsfir | | | | |
| | | | Name of law firm | | | | |